BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2001  [0005582]																						
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY											
TO	TAL CLAIMS		24				R/	ATE	FEE		RATE	FEE										
FOR			NUMBER FILED		NUMBER EXTRA		BAS	IC FEE	370.00	OR	BASIC FEE	740.00										
TOTAL CHARGEABLE CLAIMS			24 minus 20=		•4		X	\$ 9=		OR	X\$18= <sup>1</sup>	72.00										
INDEPENDENT CLAIMS			3 minus 3 =		•		×	42=		OR	X84=											
MUI	LTIPLE DEPEN	DENT CLAIM PE	RESENT	SENT				40=		OR	+280=											
* If the difference in column 1 is less than zero, enter "0" in column 2								TAL		OR	TOTAL	812.00										
CLAIMS AS AMENDED - PART II									ENTITY	OR	OTHER											
	1-60	(Column 1) CLAIMS			mn 2) HEST	(Column 3)	3.	MLL	ADDI-		Ontale	ADDI-										
A F		REMAINING AFTER		PREV	ABER OUSLY FOR	PRESENT EXTRA	. RATE TIC		TIONAL FEE		RATE	TIONAL FEE										
AMENDMENT A	Total	* OTT	Minus	*2	4	.3	×	\$ 9=	·	OR	<del>X\$1</del> 8=	150										
	Independent	. 3	Minus	*** (	3_	= ()	×	42=		OR	X84=											
۲	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+1	40=.		OR	+280=											
1011. (11-E, ) 1-12								TOTAL		OR	TOTAL ADDIT, FEE	150										
		(Column 1) (Column 2) (Column 3						IT. FEE		B	ADDII. 1 CC	T										
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIG NUI PREV	HEST MBER NOUSLY D FOR	PRESENT EXTRA	A	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE										
DME	Total	*	Minus	##		8	×	\$ 9=		OR	X\$18=											
BER	Independent	•	Minus	***		=	]   ×	42=		OR	X84=	·										
4	FIRST PRESENTATION OF MULTIPLE DEPENDEN			IT CLAIM			140-		OR	+280=												
TOTAL										╣	TOTAL											
ADDIT. FEE ADDIT. FEE																						
_	}	(Column 1) 1 CLAIMS	1.	HIC	umn 2)	(Column 3)			ADDI-	1		ADDI-										
AMENDMENT C		REMAINING AFTER AMENDMENT		PRE	MBER MOUSLY D FOR	PRESENT EXTRA	F	ATE	TIONAL		RATE	TIONAL FEE										
	Total	*	Minus	ark .		=	] [×	\$ 9=		OR	X\$18=											
	Independent	•	Minus	***		s.	<b>↓</b>     7	(42=		OR	X84=											
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							140-		1												
	* If the color in column 1 is less than the entry in column 2, write "0" in column 3.																					
8	If the "Highest Ni	umber Previously F	Paid For" IN TH	IS SPAC	E is less th F ie loce th	an 20, enter "20 an 3. enter "3."		IT. FEE		#	* If the entry in column 1 is less than the entry in column 2, where of it column 3.  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											

Application or Docket Number